

# TRANSMITTAL FORM

Application Serial Number	10/736,896
Filing Date	DECEMBER 17, 2003
First Named Inventor	BORIS MASLOV, ET AL.
Group Art Unit	2837
Examiner Name	COLON SANTANA, E.
Attorney Docket No.	76897-018CIP3
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

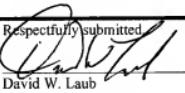
<input checked="" type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <li><input type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <ul style="list-style-type: none"> <li><input type="checkbox"/> Formal Drawing(s)</li> </ul>	<input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <li><input type="checkbox"/> Certificate of Correction (in duplicate)</li> </ul>
<input checked="" type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input type="checkbox"/> After Final</li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]</li> </ul>	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <ul style="list-style-type: none"> <li><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)</li> </ul>	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <ul style="list-style-type: none"> <li><input type="checkbox"/> Appeal Brief (in triplicate)</li> </ul>
<input checked="" type="checkbox"/> Petition for Extension of Time (1 months)	<input type="checkbox"/> Terminal Disclaimer <ul style="list-style-type: none"> <li><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application</li> </ul>	<input type="checkbox"/> Status Inquiry <ul style="list-style-type: none"> <li><input type="checkbox"/> Return Receipt Postcard</li> </ul>
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> Form PTO-1449</li> <li><input type="checkbox"/> Copies of IDS Citations</li> </ul>	<input type="checkbox"/> Small Entity Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> CD(s) for large table or computer program</li> </ul>	<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <ul style="list-style-type: none"> <li><input type="checkbox"/> Additional Enclosure(s) (please identify below)</li> </ul>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Amendment After Allowance	
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>		

## CORRESPONDENCE ADDRESS

Direct all correspondence to: PATENT ADMINISTRATOR  
 Proskauer Rose LLP  
 1001 Pennsylvania Ave., N.W.  
 Suite 400  
 Washington, D.C. 20004  
 Tel. No.: (202) 416-6800  
 Fax No.: (202) 416-6899  
 CUSTOMER NO: 61263

## SIGNATURE BLOCK

Date: April 16, 2007  
 Reg. No.: 38,708  
 Tel. No.: (202) 416-6800  
 Fax No.: (202) 416-6899

Respectfully submitted  
  
 David W. Laub  
 Attorney for the Applicant(s)  
 Proskauer Rose LLP  
 1001 Pennsylvania Ave., N.W.  
 Suite 400  
 Washington, D.C. 20004

**FEE TRANSMITTAL**  
FY 2007

*Complete if Known*

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Confirmation No.	4040

**METHOD OF PAYMENT**

Payment Enclosed:  
 Check  Money Order  Other

The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3840  
 Required Fees (copy of this sheet enclosed).  
 Additional fee required under 37 CFR 1.16 and 1.17.  
 Overpayment Credit

Applicant claims small entity status.

**FEES CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	Filing	Search	Examination	Fee Paid
Utility	300	500	200	
Design	200	100	130	
Plant	200	300	160	
Reissue	300	500	600	
Provisional	200	0	0	

*Small Entity Discount*

**1. TOTAL**

**2. EXCESS CLAIM FEES**

Total Claims	Extra Claims	Fee Paid (\$)
30	10	x \$50.00 = \$500.00
- 20 or HP =		
HP = highest number of total claims paid for, if greater than 20		
Indep. Claims	Extra Claims	Fee Paid (\$)
- 3 or HP = x \$ =		
HP = highest number of total claims paid for, if greater than 3		

Multiple Dependent Claims	Fee(\$)	Small Entity fee (\$)	Fee Paid (\$)
	360	180	

**2. TOTAL:** **\$500.00**

**3. APPLICATION SIZE FEE**

If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid
-100=	0	/50=	round up to a whole number	x = 0.00

**3. TOTAL:** **0.00**

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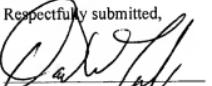
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**TOTAL AMOUNT SUBMITTED**

**(\$620.00)**